

President's/Spokesperson's Agreement

(The following contact information must be the same as on the first page of this application for Student Organizations. This also must be completed by Programs of Study.)

An officer of a Student Organization must be completing six or more credits per semester, excluding the summer semester.

I, _____, agree to serve as the
Print name

_____ President/Spokesperson for _____.
Year Student Organization Name

I understand that my name and contact information will be listed with the marketing of this Student Organization as the group's President/Spokesperson for the amount of time as agreed above. I agree to notify the Student Organization's advisor, the Student Organization, and the Associate Dean for Student Services immediately if any contact information changes or if I am unable to serve as President/Spokesperson or the entire period as agreed to above. I agree to ensure that the Student Organization's advisor has a copy of the current recognized application and SOAP, information regarding the group activities and meetings, my contact information, and assist with accurate record keeping.

Signature Date

E-mail address Phone #